STANDARDIZATION DOCUMENT IMPROVEMENT PROPOSAL

NTB CONTROL NUMBER 96-004

INSTRUCTIONS

- 1. The preparing activity must complete blocks 1,2, 3, and 8. In block 1, both the document number and revision letter should be given.
- 2. The submitter of this form must complete blocks 4, 5, 6, and 7.
- 3. The preparing activity must provide a reply within 30 days from receipt of the form

NOTE: This form may not be used	I to request conies of do	cuments, nor to request waivers, or cla	arification of
		n this form do not constitute or imply a	
waive any portion of the referenced			dirionzation to
waive any person or the referenced		2. DOCUMENT DATE (YYMMDD)	
LDECOMMEND A CHANCE.	MIL-STD-2500A	941012	
I RECOMMEND A CHANGE:		041012	
3. DOCUMENT TITLE			
NATIONAL IMAGERY TRANSMIS	SION FORMAT (VERS	ION 2.0)	
4 NATURE OF CHANGE (Identify paragraph	h number and include prope	sad rowrite if possible. Attach overs shoots a	s nooded)
4. NATURE OF CHANGE (Identify paragraph number and include proposed rewrite, if possible. Attach extra sheets as needed.)			
Add a registered tag "erdasm" to the registered tag table in the National Imagery Transmission Format (Version			
2.0), MIL-STD-2500A, Appendix B, Paragraph 30.1, page 117.			
5. REASON FOR RECOMMENDATION			
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6. SUBMITTER			
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6. SUBMITTER a. NAME (Last, First, Middle Initial)		b. ORGANIZATION Geodynamics. Inc.	
6. SUBMITTER a. NAME (Last, First, Middle Initial) Beck, Larry		Geodynamics, Inc.	7. DATE SUBMITTED
6. SUBMITTER a. NAME (Last, First, Middle Initial) Beck, Larry c. ADDRESS (Include Zip Code)	300	d. TELEPHONE (Include Area Code)	7. DATE SUBMITTED (YYMMDD)
6. SUBMITTER a. NAME (Last, First, Middle Initial) Beck, Larry c. ADDRESS (Include Zip Code) 2801 Buford Highway N.E., Suite	300	Geodynamics, Inc.	
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6. SUBMITTER a. NAME (Last, First, Middle Initial) Beck, Larry c. ADDRESS (Include Zip Code) 2801 Buford Highway N.E., Suite Atlanta, GA 30329 8. PREPARING ACTIVITY CENTRAL III a. NAME Kennith D. Whitson c. ADDRESS (Include Zip Code) STSD/SESD/SB 8401 Old Courthouse Road		d. TELEPHONE (Include Area Code) (1) Commercial (404) 248-9000 (2) AUTOVON (If applicable) b. TELEPHONE (Include Area Code) (1) Commercial (703) 275-5647 IF YOU DO NOT RECEIVE A REPICONTACT: Defense Quality and Standardization Office	(2) AUTOVON LY WITHIN 45 DAYS,
6. SUBMITTER a. NAME (Last, First, Middle Initial) Beck, Larry c. ADDRESS (Include Zip Code) 2801 Buford Highway N.E., Suite Atlanta, GA 30329 8. PREPARING ACTIVITY CENTRAL IN a. NAME Kennith D. Whitson c. ADDRESS (Include Zip Code) STSD/SESD/SB		d. TELEPHONE (Include Area Code) (1) Commercial (404) 248-9000 (2) AUTOVON (If applicable) b. TELEPHONE (Include Area Code) (1) Commercial (703) 275-5647 IF YOU DO NOT RECEIVE A REPICONTACT: Defense Quality and Standardization Office 5203 Leesburg Pike, Suite 1403, Falls Chu	(2) AUTOVON LY WITHIN 45 DAYS,